# APPLICATION DATA SHEET

## **Application Information**

Application Type::

Regular

Subject Matter::

Utility

CD-ROM or CD-R?::

No

Sequence submission?::

No

Title::

BODY FLUID CARTRIDGE EXCHANGE PLATFORM

DEVICE

Attorney Docket Number::

ATA-333

Request for Early Publication?::

No

Request for Non-Publication?::

No

Suggested Drawing Figure::

3

Total Drawing Sheets::

10

Small Entity?::

Yes

Petition included?::

No

Licensed US Govt. Agency::

No

Secrecy Order in Parent Appl.?:: No

## **Applicant Information**

Applicant Authority Type::

Inventor

Primary Citizenship Country::

US

Status::

**Full Capacity** 

Given Name::

Steve

Middle Name::

A.

Family Name::

Herweck

City of Residence::

Nashua

State or Province of

Residence::

NH

Country of Residence::

US

Street of mailing address::

4 Crestwood Lane

City of mailing address::

Nashua

State or Province of

mailing address::

NH

Country of mailing address:: US

Postal or Zip Code of mailing

address:: 03062

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Paul

Family Name:: Martakos

City of Residence:: Pelham

State or Province of

Residence:: NH

Country of Residence:: US

Street of mailing address:: 1 Regis Drive

City of mailing address:: Pelham

State or Province of

mailing address:: NH

Country of mailing address:: US

Postal or Zip Code of mailing

address:: 03076

### **Correspondence Information**

Correspondence Customer

Number:: 000959

### **Representative Information**

Representative Customer	000959	
Number::		

#### **Assignee Information**

Assignee name:: ATRIUM MEDICAL CORPORATION

Street of mailing address:: 5 Wentworth Drive

City of mailing address:: Hudson

State or Province of mailing

address:: NH

Country of mailing address:: US

Postal or Zip Code of mailing Address::

03051